CLAIMS ONLY		Application Number 10677233		Filing Date	
		Applicant(s)			

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	\cancel						51						
2							52						
3							53						
4							54						
5	1						55						
6		1					56						
7		1					57						
8		1					58						
9		1					59						
10		1					60						
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	1						Total Indep						
Total Depend	12						Total Depend						
Total Claims	13						Total Claims						